UNITED STATES PATENT & TRADEMARK OFFICE Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND						
1 Date of Request: 7-15-05 2 Serial/Patent # 10/518633						
3 Please refund the following fee(s):			4 PAP		5 DATE FILED	6 AMOUNT
	Filing			/_	12-20-04	\$ 50
	Amendment					\$
	Extension of Time					\$
	Notice of Appeal/Appeal					\$
	Petition					\$
	Issue					\$
	Cert of Correction/Terminal Dis	sc.				\$
	Maintenance					\$
	Assignment					\$
	Other					\$
			7 TOTAL AMOUNT S SO			\$ 50
			8 TO BE REFUNDED BY:			
10 REASON:			Treasury Check			
	Overpayment		Credit Deposit A/C #:			
	Duplicate Payment			9 6	2 5 0	120
	No Fee Due (Explanation):					
11 REFUND REQUESTED BY:						
TYPED/PRINTED NAME: # JOHNSON TITLE: paralegal						
SIGNATURE:						
office: PCT						
THIS SPACE RESERVED FOR FINANCE USE ONLY:						
APPROVED: DATE:						
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Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

FORM PTO 1577 (01/90) Office of Finance Refund Branch Crystal Park One, Room 802B